



Wounded Spirits, Ailing Hearts 4 Psychotherapy Written Video Transcript

Peter, as you know, the mainstay of treatment for chronic combat-related PTSD is still long-term individual and group psychotherapy. The latter enables the veteran to more easily discuss traumatic memories, PTSD symptoms and functional deficits with others who have had similar experiences. [00:00.20.00] Cognitive behavioral interventions such as anger management, grief work and direct therapeutic exposure are widely used often in combination with pharmacotherapy. But frankly, these approaches have had mixed results and there's not much outcome data available. A number of well controlled treatment trials [00:00.40.00] are underway and promise to shed light on their effectiveness. These techniques appear to work with many Native American veterans but better when cultural factors are taken into account. For example, group therapy is likely to be more successful when a majority of the participants are Indian. And as we've indicated, [00:01.00.00] the meaning and consequences of PTSD might be quite different for them than their non-Indian counterparts. It also may help to more closely approximate native forms of such interaction as represented by talking circles which represents another way of telling one's story.

And given the increasing reliance on pharmacotherapy [00:01.20.00] we need to consider the realities of managing psychopharmacological treatment in isolated Indian communities.

Peter, that brings up another issue. Because of the frequent alcohol abuse of this population clinicians need to consider its possible interaction with medication. And there's another less obvious [00:01.40.00] matter, the conflict between 12 step programs such as Alcoholics Anonymous and pharmacotherapy. AA-like programs are the most common treatment for alcoholism in Native communities. This approach characterizes alcohol and drugs as poisons and encourages the recovering alcoholic to avoid them. Struggling [00:02.00.00] with addiction, Indian and Native veterans are hard pressed to distinguish between the harmful effects of some drugs and the beneficial effects of others and as a consequence often avoid all of them. Mental health providers should anticipate this and explore ways of reconciling such different courses of treatment. But, [00:02.20.00] regardless of the intervention, patient adherence to treatment is likely to be troublesome. Veterans with PTSD distrust authority figures. They especially suspect authority associated with the government including the VA and the IHS. Past tribal federal relationships amplified this distrust [00:02.40.00] in the case of Native Americans. The resulting lack of communication often combines among Indian and Native veterans with cultural rules about whom and how one should share personal thoughts, feelings and behavior. Thus, your first attempts at establishing rapport are likely to be frustrating. [00:03.00.00] Many veterans with PTSD also have an angry and defiant manner. They can quickly become seen as difficult, even hateful. Moreover, the



family support which we often look to, especially in Native communities to temper such behavior and encourage treatment compliance is absent. It's [00:03.20.00] another example of how PTSD symptoms drive away the people who offer love and support. Rather than a hindrance unfortunately the first thought that crosses most provider's minds, culture offers points of leverage for establishing therapeutic alliances, for anticipating areas [00:03.40.00] of treatment resistance, for framing challenges to personal growth, to incorporating incentives into treatment contracts and for identifying positive supportive activities as well as environments. Treating PTSD is obviously challenging and rewarding. Thank you for [00:04.00.00] being among those who care for these men and women. Your work helps these veterans and their families and honors them for their special place in our communities. You can learn more about special programs for women veterans by contacting the VA's Center for Women Veterans at area code 202-273-6193. [00:04.20.00] The VA's National Center for PTSD is in White River Junction, Vermont. Call area code 802-296-5132 or visit their Web page. The Center has a wealth of information including current literature on PTSD [00:04.40.00] and regularly updated summaries of assessment and treatment. The program guide that accompanies this series also offers more specific information and resources.

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